

SAMPLE AGE 23 ENROLLEE LETTER (ON EMPLOYER LETTERHEAD)

Dear Enrollee:

Under the terms of The Local Choice Health Benefits Program (TLC), dependent children may be covered until the end of the calendar year in which they turn age 23 if they live with you or are away at school and you provide at least one half of their support. Our records indicate that you provide coverage for a child whose eligibility will cease as of January 1, 2006.

Because your child is no longer eligible for the Program, you may be able to reduce your membership and also lower your premiums. **Although coverage will automatically terminate for an ineligible child, an Enrollment form is required if your membership is to be reduced. The Enrollment form must be received within 31 days of the loss of eligibility, otherwise membership cannot be reduced without a qualifying mid-year event or until open enrollment. TLC will make no refunds and we cannot make retroactive changes.**

There may be three continuation options for children who lose coverage because they are no longer eligible for coverage in the TLC Health Benefits Program. They are:

- (1) Your child may enroll in Extended Coverage under the provisions of the Public Health Service Act (COBRA). If eligible, A Notice/Election of Health Care Coverage Continuation, and an Enrollment Form, will be sent to your child. COBRA is not available to all groups. Please consult with you Group Benefits Administrator for more information regarding this option.

Even if your child is not eligible for Extended Coverage, they will be sent a Certificate of Creditable Health Coverage (as required by the Health Insurance Portability and Accountability Act of 1996) The Certificate of Creditable Health Coverage provides evidence of prior creditable health coverage and is sent to all terminating participants. You may need to furnish it if your child becomes eligible for coverage under a health plan that excludes coverage for certain medical conditions which existed before enrollment.

- (2) Your child may enroll in non-group conversion coverage available through your current health benefits plan. You must contact the plan directly to purchase non-group coverage.

(3) If you believe that your child qualifies as an adult disabled child, they may be eligible to continue coverage under the TLC Health Benefits Program.

- Employees enrolled in plans administered by Anthem Blue Cross Blue Shield must apply within 31 days of the date the child loses eligibility.
- Employees enrolled in the Kaiser Permanente regional plan must contact Kaiser prior to the date the child loses eligibility.

Contact your agency Group Benefits Administrator for information on eligibility requirements and necessary action. Please note that the approval process can be very time consuming. If you feel that your child may qualify for this provision, we recommend that you take immediate action.

If our records are incorrect and you do not have a dependent child who will reach age 23 by December 31, 2005, please notify your Group Benefits Administrator with your child's correct date of birth.

Sincerely,

Enclosures: Enrollment Form
Certificate of Creditable Coverage

Revised 09/2005